

# **DIVISION SCOPE OF SERVICE**

<b>Division:</b> MOUNTAIN
<b>Classification:</b> CERTIFIED-LICENSED OCCUPATIONAL THERAPIST
<b>Applicant Name:</b>
<p><b>Certified-Licensed Occupational Therapist:</b> The Certified-Licensed Occupational Therapist must have equivalent qualifications, competence and function in the same role as employed individuals performing the same or similar services at the facility.</p> <p><b>Definition of Care or Service:</b> The Certified-Licensed Occupational Therapist evaluates and treats patients recovering from injury or disease. Scope of Service may include:</p> <ul style="list-style-type: none"> <li>• Restores function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities</li> <li>• Examines patient's medical history</li> <li>• Test and measures patient's strength, range of motion, balance, coordination, posture, muscle performance and motor function</li> <li>• Demonstrates Clinical and Service excellence behaviors to include code of HCA Healthcare conduct core fundamentals in daily interactions with patients, families, co-workers and physicians.</li> </ul> <p><b>Setting(s):</b></p> <ul style="list-style-type: none"> <li>• Healthcare facilities including but not limited to hospitals, outpatient treatment facilities, imaging centers and physician practices</li> <li>• Patient care areas, all settings</li> </ul> <p><b>Supervision:</b></p> <ul style="list-style-type: none"> <li>• Direct supervision by department director, site manager or designee <ul style="list-style-type: none"> <li>○ Indirect supervision by Licensed Occupational Therapist and the National Board of Certified Occupational Therapist (NBCOT)</li> </ul> </li> </ul> <p><b>Evaluator:</b> Physical Therapy department director or designee</p> <p><b>Tier Level:</b> 2</p> <p><b>eSAF Access Required:</b> YES</p> <p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• Bachelor's degree or higher in occupational therapy</li> <li>• Occupational Therapist License</li> <li>• Certified by the National Board of Certified Occupational Therapists (NBCOT) in certain states</li> <li>• American Heart Association health care provider BLS Certification</li> </ul> <p><b>NOTE:</b> Where education may not be defined in qualifications area of the Scope, HCA Healthcare requires the highest level of education completed (not training or courses) confirmed on your background check.</p> <p><b>State Requirements:</b></p> <ul style="list-style-type: none"> <li>• Certification is <b>not</b> required in Idaho</li> </ul> <p><b>Experience:</b></p> <ul style="list-style-type: none"> <li>• N/A</li> </ul> <p><b>Competencies:</b> The Certified-Licensed Occupational Therapist will demonstrate:</p>

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- Safe and effective operation of therapy equipment
  - Consistently obtains quality clinical outcomes
  - Maintains equipment in good working order
  - Demonstrates effective infection control practices related to equipment operation
- Accurate patient information review and evaluation
  - Uses at least two ways to identify patients before treating or performing a procedure
  - Verifies that the requested procedure correlates with the patient's clinical history, presentation and physician order
- Participates in the pre-procedure process to verify the correct procedure, for the correct patient, at the correct site and involves the patient in the verification process when possible
  - Accesses the patient medical record appropriately
  - Documents in the medical record according to the facility standard/policy
- Appropriate Diagnostic Examination Results
  - Performs occupational therapy plan to comply with applicable protocols and treatment guidelines
  - Utilizes outcome measures to assess the results of interventions administered to patients
  - Notifies the appropriate health provider when immediate treatment is necessary, based on procedural findings and patient condition
  - Provides a written or oral summary of preliminary findings to the physician
- Infection Prevention
  - Practices consistent hand hygiene
  - Uses personal protective equipment (PPE)
  - Required immunizations per Division requirements
  - Complies with Isolation precautions

### **References:**

United States Department of Labor – Bureau of Labor Statics; Occupational Outlook Handbook, 2010-11 edition; Retrieved from <http://www.bls.gov/oco/ocos080.htm>

National Board of Certified Occupational Therapists (NBCOT): <https://www.nbcot.org/>

Alaska Board Of Physical Therapy & Occupational Therapy

<https://www.commerce.alaska.gov/web/cbpl/ProfessionalLicensing/PhysicalTherapyOccupationalTherapy.aspx>

Utah Board Of Physical Therapy & Occupational Therapy <https://dopl.utah.gov/ot/index.html>

Idaho State Occupational Therapy Licensure Board <https://ibol.idaho.gov/IBOL/BoardPage.aspx?Bureau=OCT>

### **Document Control:**

- Created 12/4/2017
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**Your signature confirms you will be able to comply with the Qualifications and Competencies listed within this Scope of Service and that you will confirm education via your background check.**

**Applicant Printed Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_